

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|-----------|
| FEES DETERMINATION | SIMR UF | | 058-29-01 |
| O.I.P.E. CLASSIFIER | | | 9/5/01 |
| FORMALITY REVIEW | SL | 109 | 10/29/01 |
| RESPONSE FORMALITY REVIEW | SI | 1021 | 03/19/02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|-------|----------|
| Final | Original |
| 1 | 3/22/01 |
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| 3 | J |
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| 5 | ✓ |
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| Claim | Date |
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| Final | Original |
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| Claim | Date |
|-------|----------|
| Final | Original |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

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5/15/01